UNITED
NATIONS

AE

General Assembly
Economic and Social Council

Distr.
GENERAL

A/46/204/Add.1
E/1991/80/Add.1
19 July 1991

Original: ENGLISH/FRENCH

GENERAL ASSEMBLY
Forty-sixth session
Item 12 of the preliminary list*
REPORT OF THE ECONOMIC AND
SOCIAL COUNCIL

ECONOMIC AND SOCIAL COUNCIL
Second regular session of 1991
Agenda item 13
IMPLEMENTATION OF THE DECLARATION
ON THE GRANTING OF INDEPENDENCE
TO COLONIAL COUNTRIES AND PEOPLES
BY THE SPECIALIZED AGENCIES AND
THE INTERNATIONAL INSTITUTIONS
ASSOCIATED WITH THE UNITED NATIONS

Assistance to the Palestinian people

Report of the Secretary-General

Addendum

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II. REPLIES FROM THE ORGANIZATIONS OF THE UNITED NATIONS SYSTEM

B. Specialized agencies

World Health Organization

Special technical support

1. For many years the World Health Organization (WHO) has provided support and assistance for the population of the occupied Arab territories in order to improve their health conditions. In 1989, its member States considered it essential to intensify this assistance and requested the Director General to take all necessary steps in order to implement the World Health Assembly resolutions related to the health conditions of the population in the occupied Arab territories. A technical support programme for improving health conditions was prepared in October 1989, and in February 1990 a Medical Officer was put in charge of its implementation.

2. On the basis of the programme elaborated in October 1989, about 45 project proposals have been received from Palestinian humanitarian, charitable and medical organizations and from public and charitable hospitals, requesting WHO collaboration in:

(a) Improving primary health care by reorganizing the primary health care network, creating or strengthening units of rehabilitation and physiotherapy, procuring medical equipment for primary health care centres and providing transport facilities for mobile clinics;

(b) Providing medical equipment to the charitable hospitals, creating new hospital units and reorganizing the transport system;

(c) Creating and developing mental health centres;

(d) Providing fellowships and organizing training for doctors and nurses, locally and abroad.

3. The response of WHO was to make a very detailed and thorough technical evaluation of the proposals submitted and to work out with the cooperating institution project profiles for the identification of donors.

4. In July 1990, 34 project proposals costing an estimated $US 11,269,000 were included in an appeal to donors from the Director General. The appeal resulted in financial contributions from several countries, totalling $US 4,500,000, channelled either through WHO or directly to the institutions concerned. Ten projects were implemented by WHO, totalling $US 2,100,000; several others, totalling $US 2,400,000 have been implemented or are currently being implemented by the United Nations bodies present in the occupied Arab territories (the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) and the United Nations Development Programme (UNDP)) and by non-governmental organizations in collaboration with Palestinian institutions. An account of the status of progress and implementation of the projects included in the appeal by the Director General is available. Many of them have yet to be funded.

5. To respond to the new health needs arising from the Gulf crisis, a new appeal was made by the Director General in September 1990 for aid to the charitable hospitals in the occupied Arab territories. Several donors responded positively. The assistance pledged or received as a result of this appeal is about $US 1,500,000, most of it for the partial covering of operating expenses, medical and surgical equipment and assistance to the charitable hospitals on the West Bank and Gaza. In addition, the Commission of the European Communities has pledged $US 6,000,000 to be channelled through the Netherlands Red Cross Society and is to be implemented in cooperation with charitable institutions in response to the Director General's appeal.

6. Whatever the method of financing of the health facilities in the occupied Arab territories, the WHO medical officer in Jerusalem continues to coordinate the implementation of the special technical programme, working as a technical adviser in the health field with all the parties concerned.

WHO collaborating centres in the occupied territories

7. Initially set up to strengthen the local capability for operational research on primary health care, the centres have seen their functions change substantially over the years, depending on the extent of their integration with the existing health services, the availability of human and financial resources and other intrinsic factors such as the cohesiveness of the technical committees guiding them or extrinsic factors such as the security of the environment in which they operate.

8. Since 1988, when WHO evaluated the operation of the centres, each has developed in its own way and has had to face slightly different difficulties. Their present situation is summarized below.

WHO Collaborating Centre for Primary Health Care Research, Gaza

9. Initially set up within the pre-existing health structures in 1985, this centre has maintained and even strengthened its institutional and technical links with the health services in Gaza. A number of its staff have responsibilities both within the Gaza health system and within the WHO centre. There are two staff members concerned with technical and administrative matters. The Director is the Chairman of the Management Board, which meets once a month to evaluate research proposals and the preliminary results of surveys.

10. The scientific quality of this centre's work is good. The projects are selected according to their relevance to everyday health problems, and have a real impact on the development of the health strategies and standards applied in the Gaza Strip.

11. The attitude of the community and its leaders to the centre seems to be positive. The centre has established working relations with non-governmental organizations and with the UNRWA health centres. It has scientific and technical relations with outside academic institutions.

12. Finally, the centre produces a monthly epidemiological bulletin that is noteworthy for the quality of its presentation and for its content.

WHO Collaborating Centre for Research on Primary Health Care in Ramallah

13. This centre was set up in 1985. It had readier access to the international scientific community at a time when travel within and outside the territory was relatively easy. All this has changed since the start of the intifadah. The operational and logistic difficulties have been accentuated by irregular administrative and financial support. The rental for the premises accommodating the two Ramallah centres and some project costs totalling $US 623,000 for the period May 1985 until June 1991 were paid by WHO; the WHO funds are channelled through UNDP, which has an administrative unit in Jerusalem.

WHO Collaborating Centre for Research on Development of Human Resources in Ramallah

14. This centre was set up with the intention of revitalizing training and of setting up mechanisms for the projection of staff needs and for coordinating and training staff in the territories or abroad.

15. Up to now the centre has had only very limited activities and its constraints are largely the same as those described for the Collaborating Centre for Research on Primary Health Care. Specific constraints are the lack of specialist staff, irregular financial support and a general working climate unfavourable to medium-term or long-term planning. Nevertheless, the centre has managed during the past year to arrange the training abroad of six specialists in diabetes (financed by WHO) and to organize a course on information technology.

Conclusion

16. This report gives rise to certain reflections on measures essential to ensure improvements in the health conditions of the Arab population in the occupied Arab territories. It shows the efforts of WHO in this domain to respond to World Health Assembly resolutions. These efforts have been reinforced during the past year.

17. The appeals of the Director General have resulted in support from the donor community. This support will undoubtedly continue in the future.

18. After one year of operation in the occupied Arab territories, the WHO programme is entering a new phase in the strengthening of primary health care institutions; WHO will increase its efforts through the existing mechanisms.